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••••••				Judy Readman			(Depositor's name) (Signature)		
-				2/2/9	2/21/2006				
APPLICATION NO.	FILING DATE		FIRST NAMED IN	IVENTOR	ATTORNEY DO	CKET NO. C	CONFIRMATION NO.		
10/600,901	06/20/2003		Vincent D. Mo	Ginniss	12665DI	V1	6803		
TITLE OF INVENTION: E	LECTROOPTIC COMPOU	NDS AND METH	ODS FOR MAK	ING					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	nonprovisional NO \$140			\$300	\$1700)	02/22/2006		
EXAM	MINER	ART UN	i T	CLASS-SUBCLASS					
ROBERTSO	N, JEFFREY	1712		570-113000 .					
CFR 1.363). Change of corresponded rest form PTO/SB/1 "Fee Address" indicates.	the address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	RESIDENCE DATA TO E								
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified b n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear T a substitute for	on the patent. If an as filing an assignment.	ssignee is identified t	selow, the docu	ment has been filed for		
(A) NAME OF ASSIGN	IEE	(E	B) RESIDENCE:	(CITY and STATE OR	.co07/73/3 ⁰⁰⁶ MB	IZUNE2 00000)035 10600901		
Battelle M	lemorial Institu	ıte	Co1umbu	ıs, Ohio	01 FC:1501 02 FC:1504		1400.00 OP 300.00 OP		
Please check the appropriat	e assignee category or catego	ories (will not be pr	rinted on the pate	ent): 🔲 Individual [Corporation or other	er private group	entity Government		
4a. The following fee(s) are I Issue Fee Publication Fee (No Advance Order - # o	ed fee(s), or crease an extra copy	dit any overpayment, to							
	s (from status indicated abov		D			0 00 000	1.07(-)(2)		
	SMALL ENTITY status. See			t is no longer claiming S					
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Authorized Signature	10 austr	N Ssc	~	Date	2/21	/200			
Typed or printed name	Klaus H. Wi	esmann		Registr	ation No30,2	+37			
This collection of informat	ion is required by 37 CFR 1.	311. The informati	on is required to	obtain or retain a benefi	t by the public which	is to file (and by	y the USPTO to process)		

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PTO/SB/17 (01-06)

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RACE pursuant to the Consolidat	40401			Complete	mplete if Known					
	^ .	Application Number 10/6			0/600,901					
FEE TR/	\ L	Filing Date	06-20-20							
For	First Named In	ventor	McGinniss et al.							
Applicant claims small e	ntity etatue	See 37 CER 1 2	7	Examiner Name Rober			tson, Jeffrey			
	Art Unit	Art Unit 1712								
TOTAL AMOUNT OF PAYM	IENT (\$)	1,700.00)	Attorney Docke						
METHOD OF PAYMENT (check all that apply)										
Check ✓ Credit Card Money Order None Other (please identify):										
Deposit Account De										
For the above-identifie	ed deposit a	account, the Direc	tor is he	reby authorized to	o: (check	all that ap	ply)			
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FEE CALCULATION (AII				ling or may be	subjec	t to a su	cnarge	3.)		
1. BASIC FILING, SEAR	CH, AND E FILING F			CH FEES	EYA	MINATION	IEEEQ			
Augustin attenden Thomas	<u>s</u>	mall Entity		Small Entity		Small	Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee	_	<u>(\$)</u>	Fees Paid (\$)		
Utility	300	150	500	250	200		_			
Design	200	100	100	50	130	_				
Plant	200	100	300	150	160	_	_			
Reissue	300	150	500	250	600		_			
Provisional	200	100	0	0	()	0			
2. EXCESS CLAIM FEES Fee Description	3					E	ee (\$)	Small Entity Fee (\$)		
Each claim over 20 (in	cluding R	eissues)					50	25		
Each independent clair		including Reiss	ues)				200	100		
Multiple dependent cla	ums Extra Clain	ıs Fee (\$)	East	Paid (\$)			360 ultiple F	180 Dependent Claims		
20 or HP =			=	: Faid (\$)			ee (\$)	Fee Paid (\$)		
HP = highest number of total c	laims paid fo	r, if greater than 20.								
Indep. Claims - 3 or HP =	Extra Claim	<u>1S Fee (\$)</u> X	<u> </u>	Paid (\$)						
HP = highest number of indepe	ndent claims	paid for, if greater the	nan 3.							
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction the	reof. See	35 U.S.C. 41(a)	(1)(G)	and 37 CFR 1.1	16(s).					
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> - 100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)										
Other (e.g., late filing				uiscouit)				 \$1,700		
	CHRANTTED DV									
SUBMITTED BY	- 11	11 2		Registration No.			Tolopho	200 044 404 0722		
Signature	wolf.	win	<u>~</u> →	(Attorney/Agent)	30,437		reiehild	one 614-424-6589		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) (Klaus H. Wiesmann

Total Number of Pages in This Submission

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FORM		First	Nam	ed Inve	entor	McGinniss et al.
		Art U	nit			1712
(to be used for all correspondence after initial	filing)	Exan	niner	Name		Robertson, Jeffrey
	_	Attori	ney [Docket	Number	12665DIV1

12665DIV1

ENCLOSURES (Check all that apply)										
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	☐ F	ee Attach	ed		Licensing-related	Papers				al Communication to Board peals and Interferences
	Extension Express A Information Certified Cocument Reply to I Incomplet	fiter Final fifidavits/d fifida	eclaration(s) Request ment Request sure Statement Priority		Petition Petition to Conve Provisional Applic Power of Attornet Change of Correc Terminal Disclain Request for Refu CD, Number of C Landscape narks ransmittal PTO/SB/	cation y, Revocat spondence ner nd D(s) Table on 0	Address	PTC Reco	Propri Status Other below	e Transmittal; PTO-2038; Return
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Signatu	Signature Days & Wass									
Printed	name	Klaus H	. Wiesmann							
Date		02-21-2	006				Reg. No.	30,437	7	
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Typed or printed name Judy Readman									Date	02-21-2006

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